			Departr	nent of F Division	ubli of F	c He	alth a	nd So	cial Se	ervices			_		_
			Food E							Report		Page	1_0	of _	<u> </u>
	N RSN TYPE		INSPECTION	ON DATE			ABLISH		NAME						
Regular Follow-up	++*	3	TIME IN I	TIME OF	IIT	PER	MIT HO		<u> </u>		100				_
Complaint	1/1	RATING	10:40AM						INC	ORPORATE					
Investigatio	n		SANITARY P			_	ATION			2010101.01		10.00	01.61		
Other:		A	1700025							AGANA	BL)			
ES1	TABLISHME	NT TYPE	AREA	TELEPHO		No. o	of Risk F	actor/f	nterventi	on Violations	3		ISK CA	TEG	ORY
T.	PETAIL		8	477-15	524	No. c	of Repea	at Risk	Factor/In	ntervention Violations	S	O	2		
	FOO				_					EALTH INTE	_		3	10	
191 - 10 - 00	ennlianas Oll									appropriate box for CO furing inspection $R = F$			S = Dem		inte
The second secon	ce Status	1 - Not in compila	IIICE 1410 - 1401 00561 V			PTS			e Status		vohoar 41	olation F1	COS	_	
		Sup	ervision			100			Po	tentially Hazardous					
1 (IN)	UT		present, demonstrates			6	16	IN OUT	N/A N/C	Proper cooking time a	nd tempe	eratures			6
			performance duties							Proper reheating proce					6
2 (IN) O	UT		areness; policy present		T	6				Proper hot holding ten			1		6
	UT	Proper use of rep	orting, restriction & exc	lusion		6	20	IN OUT) N/A	Proper cold holding te	mperatur	es	X		6
			enic Practices				21	IN COL	(N/A) N/C	Proper date marking a	ind dispo	sition			6
4 🕪 0	UT N/A N/O	Proper eating, tas tobacco use	sting drinking, betelnut,	or		6				Consumer A	dvisor	у			
5 (N)		No discharge from	n eyes, nose, and mou			6	22	IN OUT	NA	Consumer Advisor					6
6 (IN)		Hands clean and				6				undercoo	ked food	S			
7 (IN)0	UT N/A N/O		ntact with ready-to-eat for			6				Highly Susceptible					
K			te method property follo ashing facilities supplied		+	\vdash	23	и опт	(NIA)	Pasteurized Foods use offered	ed; prohit	oited foods n	ot		6
8 (N) O	UT	accessible	asting identities asppire	.		6			-	Chemic	cal				
			red Source				24	IN OUT	(N/A)	Food additives: approv	ed and r	mnerly user			6
9(111)0			m approved source		- 9	6	27								
10 IN 0			proper temperature dition, safe, and unadul	Iterated		6	25(IN DUT		Toxic substances propused	erly iden	tified, stored			6
			available: shellstock ta						Con	formance with App	roved	Procedure	S	inches.	12.0
12 IN O	UT (N/A) N/O	parasite destruction		s-,		6	26	IN OUT	40	Compliance with varia					6
			m Contamination		_		20	IN OUT		process, and HACCP	plan				
13(IN DU		Food separated a	ind protected aces: cleaned & sanitiz	od		6				e improper practices or					
	-		of returned, previously							buting factors of foodbor e control measures to p					1
15 IN DI	1)		ned, and unsafe food			6		-		e control measures to p	I GACIII IO	OUDOTHE HITE	iss or my	лу.	_
				GOOD	REI	<u> </u>	. PRA	CTIC	CES						
										micals, and physical obj					
		umbered Item is n	ot in compliance and/o	COLUMN TWO IS NOT THE OWNER.	Name of Street	THE RESERVE OF THE PERSON NAMED IN			te during i Status	inspection R =Repeat	t violation	PTS =0	emerit p		DT
Complian	ce status	Safe Foo	d and Water	Icos	R	PIS	Com	pliance	status	Proper Use of	Elltensi	le	cos	R.	PIR
27	Pasteurized	eggs used where n	AND REAL PROPERTY AND REAL PROPERTY.			1	40	In	-use uten:	sils: properly stored	0.01101	10	II		1
28	Water and lo	e from approved s	ource			2	41			ulpment and linens: pro	perly sto	red, dried,			1
29			ed processing methods			1	42		ingle-use/	single-service articles: p	ropedy s	tored used			1
20	1.0.10.100		erature Control		_		43			d properly	,				1
30	,	ng methods used; a	adequate equipment for		AT CHEST	1	Samu	40	190	Utensils, Equipmer				· ·	
	temperature		L_4 L_4.0.				44			onfood-contact surfaces	cleanab	le, properly			1
31		operly cooked for I				1				onstructed, and used ng facilities: Installed, m	aintaine	Lugad tast			_
32	Approved the	wing methods use	ed			1	45	st	rios		an Hall ICC	, useu, lest			1
33	Thermomete	r provided and acc				1	46	N	onfood-co	ntact surfaces clean	Mari				1
34 🗴	Teach property	y labeled; original (entification			1	47	Tu.	ot & cold s	Physical Fa water available, adequa		IPO.			2
34 /			ood Contamination				48			water available, adequa- istalled; proper backflow					2
35 Insects, rodents, and animals not present					2	49			d wastewater properly d					2	
36 X	Contamination	ontamination prevented during food peparation, storage &				1		Toilet facilities: properly constructed, supplied, & cleaned Garbage/refuse properly disposed; facilities maintained							2
37] / Joisplay					1	Section 1								2
38 Wiping cloths: properly used and stored					1	52	$\overline{}$		dities installed, maintair					1	
39	Washing frui	ts and vegetables				1	53	A	dequate v	entilation and lighting; d		The state of the s			1
			violation(s), and	I am awar	e of th	ne cor	rective						W (8)		4100
Person in C	arge (Print	ynd Sign)	N SHE	7015	141	h ,	ary.	1	U) DE	ete: 2/4/	10				
DEH Inspec	tor (Print apt	Sloni I	1	1	4,,,	. /	7	216	-			10	ollow-u	n Date	_
J. GA	PCA/	4/10	PUZ / D. 1	MHCHE	L	10	- T44	YSE	Fo	ollow-up (Circle one):	YES	NO	ollowル ろ	2 1	8
A	pp : DEH 10.701	4 2	~ '	White: DPHS	S/DEH	Yell	owr Food	Estabilist	Iment					0 300	

Depart		Health and Social Service	es	
Food		ent Inspection Re	port	Page 2 of 3
ESTABLISHMENT NAME	Lotabilom	OCATION (Address)	port	1 age 01
CHODE		LOT ZBLK 17	AGANA, GU	
INSPECTION DATE SANITARY PERM		PERMIT HOLDER		
2 1 Ce 1 18 1700025		CHODE, INCOP	TORACED	
Item/Location		E OBSERVATIONS		1
SPAM BREAKFAST PLATE H	Temperature	°F) Item/Lo	cation	Temperature (° F)
PHICKEN / HH	102-5			
HAM BREAKFAST PLATE /HH	107.0			
HAM SANDWICH / CH	74.0			
TUNA SANDWICH CH	72-0			
HOTDOG SMOWICH CH	75.0			7.
CHIX KELAGUEN / CH	74-5			
SPAM MUSUBI CH	72-0			
		CORRECTIVE ACTI		CORRECT BY DATE
Violations cited in this report must be core		e time frames indicated, e Guam Food Code.	or as stated in Sec	tions 8-405.11 and
A REGULAR INSPE	CTION	NAS CONDUCTED) BASED (ON A
COMPLAINT # 18-0	33A & #	18-032A REG	ARDING FO	200
ITEMS SUCH AS CHIC				
	-			
NOT BEING PEFRIG				
SOLD WITHOUT A "B		the second secon	4 0	12.
PREVIOUS INSPECTIO			~	
PARTIAL EVIDENCE T	D SUPPO	T FOOD PROD	JC7S NOT	BEING
PEFPI GERATED AT				
WAS OBSERVED. N	O ENDE	CE OF SOUR S	MELL FRON	1
TATIYAS WAS OBSE	ERVED !	URING TIME OF	INSPECTION	٧.
THE FOLLOWING W	OLATION.	WERE OBSERV	ED:	
19 PHF/TCS FOODS SUC	H 10'. C	arc. and property	DA CO DV	1-1- P 0 -
1 10 10003 300		TICKEN, BRAM BR		
		HELD AT THE		TOT
HOLDING TEMPERAT				IF/TCK
FOODS SHALL BE P	ROPERLY	HOT HELD AT	140°F & 1	ABOVE
TO PREVENT THE P	MPID GK	OWTH OF BACT	ERIA.	
COS. PHF/TCS FOO	DS PEM	VED FROM EST	MEN'SHMEN	T.
Based on the inspection today, the items listed above identify further regulatory actions. If seeking to appeal the result of the				
Herson in Charge (Print and Sign)	A		Date:	2/4/18
DEH Inspector (Print and Sign) - U - CRUZ	D. MITCH	LL/ CTARASE	Date:	
	/hite: DPHSS/DEH	Yellow: Food Establishment		1-110

		Public Health and Social Services of Environmental Health	
20745			3 of 3
CHO	IMENT NAME DE	LOCATION (Address) LOT 2 BLK 17 AGANA, GU	
INS	PECTION DATE SANITARY PERMIT NO.	PERMIT HOLDER	
2	16/18 170002577	CHODE IN CORPORATED	1
ITEM NO.	OBSERVATIONS	S AND CORRECTIVE ACTIONS	CORRECT BY DATE
Violation		thin the time frames indicated, or as stated In Sections 8 of the Guam Food Code.	-405.11 and
20		3: CHICKEN KELAGUEN, SPAM MUSUR	21
	· ·	NOT HELD AT PROPER COLD HOLD	- 77
	L Company of the Comp	& BELOW. ALL PHF/TCS FOODS	CUS
	SHALL BE PROPERLY COL		
	PREVENT THE RAPID GR		
-	COS. PHF/TCS FOODS		
33	NO THERMOMETER PRO	VIDED FOR FOOD CHILLER IN	3/6/18
		THEIRMONETER STALL BE PROVIDE	
		HELD AT THE PROPER TEMPERATUR	
			1
34	NO LABELS PROVIDED F	FOR FUUD ITEMS NOT IN ORIGINAL	8/6/18
		THIGO IN REAR CHILLED). LABELS	7 -7 -7 -1 -1
		ENSURE PROPER IDENTIFICATION.	
		THE PERMITTER	
36	BANANAS STORED DIRECT	TLY ON THE FLOOR. FOOD SHALL B	3/61
		/	7
	PREVENT CONTAMINATION		
		Ti Ti	
	PHOTOS TAKEN.		
	"A" PLACARD # 02152	ISSUED.	
	PIC BRIEFED ON THE A	BOVE	
	ži.		
sed on the l	nspection today, the Items listed above Identify violations wh	nich shall be corrected by the date specified by the Department. Failure to comply	may result in
te.	2 0	, a written request for hearing must be submitted to the Director before the indica	ted correction
SHISL		Date: 2/6	18
	(Print and Sign) - //	TOTELL / C TAKASE Date: 2/6	110
U . U/	FULL INFI G. OF OC. D. M	TIMIELLI COMPAGE 2/0	